

PATENT & TRADEMARK
MORRISON | FOERSTER

2005 OCT 13 PM 4:11

US PATENT & TRADEMARK
 OFFICE

755 PAGE MILL ROAD
 PALO ALTO
 CALIFORNIA 94304-1018

TELEPHONE: 650.813.5600
 FACSIMILE: 650.494.0792

WWW.MOFO.COM

MORRISON & FOERSTER LLP
 NEW YORK, SAN FRANCISCO,
 LOS ANGELES, PALO ALTO,
 SAN DIEGO, WASHINGTON, D.C.,
 DENVER, NORTHERN VIRGINIA,
 ORANGE COUNTY, SACRAMENTO,
 WALNUT CREEK, CENTURY CITY

TOKYO, LONDON, BEIJING,
 SHANGHAI, HONG KONG,
 SINGAPORE, BAHARU

To:

NAME:	FACSIMILE:	TELEPHONE:
MS 16 Director of the U.S. Patent and Trademark Office	571-273-6500	571-272-6500

FROM: Debra J. Glaister,
 Senior Patent Agent

DATE: October 12, 2005

Number of pages with cover page:	4	
-------------------------------------	---	--

Preparer of this slip has confirmed that facsimile number given is correct: 7230/PME2

Comments:

OFFICIAL FILING

Examiner: L. Scheiner
 Art Unit: 1648
 U.S. Patent Application Serial No.: 09/904,782
 Title: ADENOVIRUS VECTORS COMPRISING INTRONS
 Filing Date: July 13, 2001
 Inventors: Suresh K. TIKOO
 Attorney Docket No.: 293102002900

Papers enclosed herewith:

1. Transmittal - 1 page
2. Request for Refund - 2 pages

Please acknowledge receipt via return facsimile

 To ensure compliance with requirements imposed by the United States Internal Revenue Service, Morrison & Foerster LLP informs you that, if any advice concerning one or more U.S. Federal tax issues is contained in this facsimile (including any attachments), such advice is not intended or written to be used, and cannot be used, for the purpose of (i) avoiding penalties under the Internal Revenue Code or (ii) promoting, marketing or recommending to another party any transaction or matter addressed herein.

CAUTION - CONFIDENTIAL

This facsimile contains confidential information that may also be privileged. Unless you are the addressee (or authorized to receive for the addressee); you may not copy, use or distribute it. If you have received it in error, please advise Morrison & Foerster LLP immediately by telephone or facsimile and return it promptly by mail.

pa-1016582

BEST AVAILABLE COPY

PTO/88/21 (08-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	09/904,782
		Filing Date	July 13, 2001
		First Named Inventor	Suresh K. TIKOO
		Art Unit	1648
		Examiner Name	L. Schelner
Total Number of Pages in This Submission	3	Attorney Docket Number	293102002900

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Refund - 2 pages Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Debra J. Glaister		
Date	October 12, 2005	Reg. No.	33,888

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8500, on the date shown below.	
Dated: October 12, 2005	Signature: (Patricia M. Ellison)

BEST AVAILABLE COPY

pa-1015835

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8500, on the date shown below.

Dated: October 12, 2005

Signature: *Patricia M. Ellison* (Patricia M. Ellison)

Docket No.: 293102002900
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Suresh K. TIKOO

Application No.: 09/904,782

Confirmation No.: 1838

Filed: July 13, 2001

Art Unit: 1648

For: ADENOVIRUS VECTORS COMPRISING
INTRONS

Examiner: L. Scheiner

REQUEST FOR REFUND

MS 16
Director of the U.S. Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

The above-identified application was properly filed as small entity, and pursuant to 37 C.F.R. 1.28 (g)(1), Applicant is entitled to small entity. Large entity fees were inadvertently paid for the Amendment and fees mailed on September 28, 2005. Pursuant to 37 C.F.R. 1.28(a), Applicant hereby requests that a refund in the amount of \$225.00 be issued.

Explanation of Fees Paid and Amount of Refund Request

In the amendment mailed September 28, 2005, Applicant inadvertently paid large entity fees, \$450.00, for a two month extension in time. Pursuant to 37 C.F.R. 1.28 (g)(1), Applicant was entitled to pay small entity fees of \$225.00. Applicant requests a refund in the amount of \$225.00.

pa-1015839

BEST AVAILABLE COPY

Application No.: 09/904,782

2

Docket No.: 293102002900

A table illustrating the fees discussed above is found below.

	Amount Authorized to be Charged by Applicant	Correct Fee Amount Under Small Entity	Refund Request
Extension for Response Within Second Month Fee	\$450.00	\$225.00	\$225.00
Total	\$450.00	\$225.00	\$225.00

Please credit \$225.00 to our Deposit Account No. 03-1952 referencing docket no. 293102002900.

Dated: October 12, 2005

Respectfully submitted,

By

Debra J. Glaister

Registration No.: 33,888

MORRISON & FOERSTER LLP

755 Page Mill Road

Palo Alto, California 94304-1018

(650) 813-5725

pa-1015839

BEST AVAILABLE COPY

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 544974772 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: September 28, 2005

Signature:

Georgina Matos
(Georgina Matos)

Docket No.: 293102002900
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Suresh K. TIKOO

Application No.: 09/904,782

Confirmation No.: 1838

Filed: July 13, 2001

Art Unit: 1648

For: ADENOVIRUS VECTORS COMPRISING
INTRONS

Examiner: L. Scheiner

AMENDMENT UNDER 37 C.F.R. SECTION 1.111

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

This is in response to the final Office Action dated April 28, 2005 (Paper No. /Mail Date 20050425), for which a response was due on July 28, 2005, and in response to the Examiner-initiated Interview Summary sent August 19, 2005 via facsimile (Paper No. 08192005) which indicated that the finality of the Office Action mailed April 28, 2005 has been withdrawn.

Filed herewith is a Petition and fee for a two months extension of time, thereby extending the deadline for response to September 28, 2005. Accordingly, this response is timely filed. Reconsideration and allowance of the pending claims, as amended, in light of the remarks presented herein are respectfully requested. Submitted concurrently herewith is a Supplemental Information Disclosure Statement along with references and the appropriate fee.

10/03/2005 MAHRED1 00000028 031952 09904782

3 FC:1202 50.00 DA

Adjustment date: 11/29/2005 SDIRETA1
10/03/2005 MAHRED1 00000028 031952 09904782
03 FC:1202 50.00 CR

11/29/2005 SDIRETA1 00000026 031952 09904782

02 FC:2202 25.00 DA

BEST AVAILABLE COPY

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 8 of this paper.

BEST AVAILABLE COPY



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 293102002900	
Application Number 09/904,782		Filed July 13, 2001	
For ADENOVIRUS VECTORS COMPRISING INTRONS			
Art Unit 1648		Examiner L. Scheiner	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 450.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>33,888</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
<u>Debra J. Glaister</u> Signature		<u>September 28, 2005</u> Date	
<u>Debra J. Glaister</u> Typed or printed name		<u>(650) 813-5725</u> Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.			

BEST AVAILABLE COPY

1/03/2005 MAHMED1 00000028 031952 09904782

2 FC:1252 450.00 DA

Adjustment date: 11/29/2005 SDIRETA1
10/03/2005 MAHMED1 00000028 031952 09904782
02 FC:1252 450.00 CR

pa-1013487

11/29/2005 SDIRETA1 00000026 031952 09904782

01 FC:2252 225.00 DA